

ARIZONA FORM
120S

Arizona S Corporation Income Tax Return

2003

For taxable year beginning MM / DD / YYYY, and ending MM / DD / YYYY

Mail to: Arizona Department of Revenue, PO Box 29079, Phoenix AZ 85038-9079

Business telephone number ()	Please Type or Print	Name	CHECK ONE: Original <input type="checkbox"/> Amended <input type="checkbox"/>
Business activity code number (from federal Form 1120S)		Number and street or PO Box	CHECK ONE: Calendar year <input type="checkbox"/> Fiscal year <input type="checkbox"/>
		City, or town, state, and ZIP code	Federal employer ID number (FEIN)
			AZ withholding tax number
			AZ transaction privilege tax number

69 Check box if: ☐ This is a first return ☐ Name change ☐ Address changeA Is this the corporation's final Arizona return? ☐ Yes ☐ NoIf yes, check one: Dissolved ☐ Withdrawn ☐ Merged/Reorganized ☐

List FEIN of the successor corporation, if any

B Does the S corporation conduct business within and without Arizona? ☐ Yes ☐ NoC Will a composite return be filed on Form 140NR? ☐ Yes ☐ No

D Total number of nonresident individual shareholders

E Total number of resident individual shareholders

F Total number of entity shareholders (See instruction page 3)

FOR DOR USE ONLY

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CHECK BOX IF:

Federal extension used to file return. 82 F ☐

1 Total distributive income (loss) - from federal Form 1120S, Schedule K 1 00

Complete lines 2-11 only if the S corporation has excess net passive income or capital gains/built-in gains. An S corporation that is not required to complete lines 2-11 must complete lines 12-34 if the S corporation has a tax liability from the recapture of tax credits or has elected to claim refundable tax credits.

2	Excess net passive income	2		00
3	Capital gains/built-in gains	3		00
4	Total federal income subject to corporate income tax - add lines 2 and 3. WHOLLY ARIZONA S CORPORATION GO TO LINE 11	4		00
5	Nonapportionable or allocable income - attach schedule. MULTISTATE S CORPORATIONS ONLY	5		00
6	Apportionable income - subtract line 5 from line 4. Multistate S corporations only	6		00
7	Arizona apportionment ratio - from Schedule B or Schedule ACA	7		
8	Income apportioned to Arizona - line 6 multiplied by line 7. Multistate S corporations only	8		00
9	Other income allocated to Arizona - attach schedule. Multistate S corporations only	9		00
10	Total income attributable to Arizona - add lines 8 and 9	10		00
11	Net income subject to Arizona corporate income tax. Wholly Arizona S corporations - enter amount from line 4 Multistate S corporations - enter amount from line 10	11		00
12	Enter tax - see instructions before completing this line	12		00
13	Tax from recapture of tax credits - from Form 300, Part II, line 25	13		00
14	Subtotal - add lines 12 and 13	14		00
15	Clean Elections Fund Tax Reduction. Check this box to send \$5 to the fund and reduce the tax (line 14) by \$5. Enter the amount of the tax reduction	15A	<input type="checkbox"/>	00
16	Nonrefundable tax credits - from Arizona Form 300, Part II, line 48	16		00
17	Credit type - enter form number for each credit claimed	17	3	3
18	Tax liability - subtract the sum of lines 15 and 16 from line 14	18		00
19	Clean Elections Fund Tax Credit. SEE INSTRUCTIONS BEFORE COMPLETING THIS LINE	19		00
20	Tax liability after Clean Elections Fund tax credit - subtract line 19 from line 18	20		00
21	Refundable tax credits - see instructions	21		00
22	Credit type - enter form number for each refundable credit claimed	22	3	3
23	Extension payment made with Form 120EXT - see instructions	23		00
24	Estimated tax payments - see instructions	24		00
25	Total payments - add lines 21, 23 and 24. Amended returns - see instructions	25		00
26	Balance of tax due - If line 20 is larger than line 25, enter balance of tax due. Skip line 27	26		00
27	Overpayment of tax - If line 25 is larger than line 20, enter overpayment of tax	27		00
28	Penalty and interest	28		00
29	Estimated tax underpayment penalty. If Form 220 is attached, check box	29A	<input type="checkbox"/>	00
30	Donation to Citizens Clean Elections Fund - see instructions	30		00
31	TOTAL DUE - payment must accompany return	31		00
32	OVERPAYMENT - see instructions	32		00
33	Amount of line 32 to be applied to 2004 estimated tax	33		00
34	Amount to be refunded - subtract line 33 from line 32	34		00

